Application or Docket Num											cket Numb	er .	
PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 89/62/695													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED		NUMBER E	NUMBER EXTRA		NTE	FEE		RATE	FEE	
BASIC FEE									345.00	OR		690.00	
TOTAL CLAIMS			LL minus 20=					-6		OR	X\$18=	828	
INDEPENDENT CLAIMS				3 minus	3 = •	•		39=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT								30=		OR	+260=		
"If the difference in column 1 is less than zero, enter "0" in column 2								TAL		OR	TOTAL	1578	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
(Column 1) (Column 2) (Column 3)								IALL	ENTITY	OR	SMALL		
DMENT A		REM	AIMS MENING FTER COMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 2	0	Minus	-66	-\	×	9=		OR	X\$18=		
AMENOM	Independent	•	/	Minus	 3	- \	×	39-		OR	X78≃		
<u> </u>	FIRST PRESE	NTATIC	ON OF MI	ILTIPLE DE	PENDENT CLAIM			30=		OR	+260=		
m/12/65							_	TOTAL IT. FEE		OR	TOTAL ADDIT. FEE		
	13/00/		umn 1)		(Column 2)	(Column 3)	_		ADDI-	1		ADDI-	
AMENDMENT B		REA	IAINING FTER NOMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	A	ATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	18	Minus	-66	4	×	\$ 9=		OR	X\$18=	4	
	Independent	·		Minus	-3	.6	×	39=		OR	X78=		
	FIRST PRESE	NTATIO	ON OF M	ULTIPLE DE	PENDENT CLAIN		+	130=		OR	+260=		
							ADD	TOTAL		OR	ADDIT. FEE	0	
	·	(Co	lumn 1)		(Column 2)	(Column 3)							
AMENDMENT C		CLAMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•		Minus	••	=	[>	\$ 9 <u>-</u> .		OR	X\$18=		
	Independent	·		Minus	•••	-		(39=		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							130-		OR			
* If the entry in column 1 is less than the entry in column 2, write 'V' in column 3.										OF	TOTAL		
•	'Il the Seighed Mr	mber P	mandousely P	aid For IN Th	IS SPACE is less th IS SPACE is less the r Independent) is the	man 3. mter "3."	~	NT. FEE In the a	_	_	AUUTI. PEI		